**APPLICATION FOR EMPLOYMENT**

*Please return the completed form by email to:* Sarah@daaroyouth.org.uk

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**CONFIDENTIAL**

Please complete this form electronically and email it to the above address.

We wish to ensure that comparison between applicants is fair and in line with our Equal Opportunities Policies. The information you provide on this form is the **only** information we will use in deciding whether you will be shortlisted for an interview. It is therefore essential that you complete the form fully and that you **clearly demonstrate** how you meet each point on the person specification. Please note that CVs are not accepted.

|  |  |
| --- | --- |
| Position applied for | Caseworker |

**PERSONAL DETAILS**

|  |  |  |
| --- | --- | --- |
| Surname/family name |  | |
| First name |  | |
| Address |  | |
| Telephone number (s) |  | |
| Email address |  | |
| Interested in (tick all that apply) | Full-time – 5 days/week | |
| When would you be available to take up the post? | |  |

**EDUCATION AND TRAINING**

Please list any education and/or training (including short courses) that you have completed.

|  |  |  |
| --- | --- | --- |
| Date undertaken | Course/Training details | Result/Qualification gained |
|  |  |  |
|  |  |  |
|  |  |  |

**REFERENCES**

Please give below the name and address of two referees who can comment on your suitability for the post. These should not be relatives or friends. If you have been employed, we would normally expect these to be your two most recent employers. We do not contact referees until a conditional offer of employment is given.

|  |  |
| --- | --- |
| First Referee | Second Referee |
| Name:  Address:  Phone:  Email:  Job Title:  Relationship to you: | Name:  Address:  Phone:  Email:  Job Title:  Relationship to you: |

**PAID AND/OR UNPAID WORK EXPERIENCE**

Please include your current/previous employment (including job training schemes), voluntary work, community activities, school placements, time caring for dependants etc. Please put in date order, starting with the most recent and continue on a separate sheet if necessary.

|  |  |  |  |
| --- | --- | --- | --- |
| **From and to (dates)** | **Job Title, Employer name and employer address** | **Duties** | **Reason for Leaving** |
|  |  |  |  |
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**SUPPORTING INFORMATION**

|  |
| --- |
| In this section we would like you to give specific information in support of your application. Please consider the person specification and demonstrate how you meet the stated requirements. Please address each of the points under the headings with relevant examples and ensure your answer is within the stated word limit (1000 words). |
| Type your answer here – the box will expand as you type. |

### CRIMINAL CONVICTIONS (Rehabilitation of Offenders Act 1974)

A prior or pending criminal conviction will not necessarily prevent you from working with us but failure to disclose this information may result in the termination of any arrangements made. You may wish to discuss this at interview.

**Do you have any criminal convictions or any pending? (Please give details)**

|  |
| --- |
|  |

**Data Protection Act 1998**

As part of the recruitment procedure we may collect and store sensitive personal data about you. We are required by law to obtain your consent to such data being recorded. It is our policy to store data relating to recruitment procedures for 6 months after the date on which it is submitted, for internal auditing purposes. Any information of this nature will be treated confidentially.

Sensitive personal data is defined as information relating to any of the following: racial or ethnic origin, political opinions, religious beliefs, trade union membership, health, sexuality or sex life, offences and/or convictions.

**I declare the information given on this form is correct to the best of my  
knowledge and acknowledge that by signing this form I give my consent to  
sensitive personal information being recorded and stored.**

Applicant Signature:

Date:

**Equal opportunities monitoring form**

DYP is committed to a policy of equal opportunities in our recruitment and selection procedures. To help us find out how far we are succeeding in providing equal access to opportunities in DYP we would appreciate your cooperation in completing this form. **This form will not be attached to your application or affect it in any way**.

**Please underline your answer in each section:**

**Gender** Male Female Intersex Non-binary Prefer not to say

If you prefer to use your own gender identity, please type:

Is the gender you identify with the same as your gender registered at birth?

Yes    No  Prefer not to say

**Age** 16-24 25-29 30-34 35-39 40-44 45-49 50-54 55-59 60-64 65+ Prefer not to say

**What is your ethnicity?**

Ethnic origin is not about nationality, place of birth or citizenship. It is about the group to which you perceive you belong. Please underline your answer.

***Asian or Asian British***

Indian Pakistani Bangladeshi Chinese Prefer not to say

Any other Asian background, please type:

***Black, African, Caribbean or Black British***

African Caribbean Prefer not to say

Any other Black, African or Caribbean background, please type:

***Mixed or Multiple ethnic groups***

White and Black Caribbean White and Black African White and Asian

Prefer not to say

Any other Mixed or Multiple ethnic background, please type:

***White***

English Welsh Scottish Northern Irish Irish

British Gypsy or Irish Traveller Prefer not to say

Any other White background, please type:

***Other ethnic group***

Any other ethnic group, please type:

**Do you consider yourself to have a disability or health condition?**

Yes No Prefer not to say

What is the effect or impact of your disability or health condition on your work? Please type here:

The information in this form is for monitoring purposes only. If you believe you need a ‘reasonable adjustment’, then please discuss this prior to your interview.

**What is your sexual orientation?**

Heterosexual Gay Lesbian Bisexual Asexual Pansexual Undecided Prefer not to say

If you prefer to use your own identity, please type:

**What is your religion or belief?**

No religion or belief Buddhist Christian Hindu Jewish Muslim Sikh

Prefer not to say If other religion or belief, please type:

**Do you have caring responsibilities? If yes, please tick all that apply**

None

Primary carer of a child/children (under 18)

Primary carer of disabled child/children

Primary carer of disabled adult (18 and over)

Primary carer of older person

Secondary carer (another person carries out the main caring role)

Prefer not to say